Case 18-13278 Doc 15 Filed 05/21/18 Entered 05/22/18 11:26:10 Desc Main

Fill in this information to	dentify your case and this	filing:
Debtor 1 First Name	UG S Middle Name	Bonee.
Debtor 2 (Spouse, if filing), First Name	Middie Name	Last Name
United States Bankruptcy Court	t for the: Northern District of I	llinois
		<u> </u>

MAY 21 2018

JEFFREY P. ALLSTEADT, CLERK INTAKE 1

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

Yes. Where is the property?	What is the property? Check all that apply. Gingle-family home	Do not deduct secured cla	d claims on Schedule D
Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Creditors Who Have Clair Current value of the entire property?	Current value of t portion you own?
City State ZiP Code	Investment property Timeshare Other	Describe the nature conterest (such as fee the entireties, or a life	simple, tenancy by
County	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	mmunity property
ou own or have more than one, list here:	Other information you wish to add about this it property identification number: What is the property? Check all that apply.	em, such as local	
.2. Street address, if available, or other description	Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	I claims on Schedule D is Secured by Property
	Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property?	
City State ZIP Code	Investment property Timeshare Other	Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
	Who has an interest in the property? Check one.		
County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	☐ Check if this is cor	nmenity property

Entered 05/22/18 11:26:10 Filed 05/21/18 Page 2 of 35 Debtor 1 What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property, Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land ☐ Investment property. City Describe the nature of your ownership State ZIP Code Timeshare interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles 2 Yes Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions, Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions)

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Debtor 1

Document

Richard Bonner

Last Name

Middle Name

Last Name

Othe	el:	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another.	the amount of any secure	
Year Appr Othe	r:roximate mileage:	Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clai Current value of the	ed claims on Schedule Dims Secured by Property. Current value of ti
Appropriate Approp	roximate mileage:	Debtor 1 and Debtor 2 only	Current value of the	Current value of t
Othe	-			
Othe	-	At least one of the debtors and another.	proporty.	uurnon van own?
Make Mode Year Appro	i momanus.			portion you onn
Mode Year Appr		☐ Check if this is community property (see	\$	\$
Mode Year Appr		instructions)		
Year Appr	e:	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions, Put
Appr	el:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	ed claims on <i>Schedule D</i>
	:	Debtor 2 only	and the second solution of the second control of the second second control of the second second second second	وسيا وعوده والموسود التها ويراشك الماسمون والم
	oximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of t portion you own?
	r information:	At least one of the debtors and another	······································	portion you our.
	T TROUTINGOTT.	☐ Check if this is community property (see	\$	\$
		instructions)		
	·			
		•		
atercraft,	aircraft, motor homes, ATVs	and other recreational vehicles, other vehicles, and access	ories	
:amples: I	Boats, trailers, motors, personal	watercraft, fishing vessels, snowmobiles, motorcycle accessor	ies	
No				
Yes	·			
. Make:		Who has an interest in the property? Check one.	Do not deduct secured cla	
Model		Debtor 1 only	the amount of any secured Creditors Who Have Claim	i claims on <i>Schedule D:</i> is Secured by Property.
Year:		Debtor 2 only	a terra terra displace i contra a contrata de con el contra de contrata de con	er samme an fire a language spirit
Other	information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the	Current value of th
1		At least one of the deotors and another	entire property?	portion you own?
İ	·	☐ Check if this is community property (see	•	
		instructions)	\$	\$
				•
u own oi	have more than one, list here:		,	
Make:		Who has an interest in the property? Check one.	Do not deduct secured clai	me or exemptions. But
Model:	•	Debtor 1 only	the amount of any secured	claims on Schedule D:
			Creditors Who Have Claim	s Secured by Property.
Year;	*************************	Debtor 1 and Debtor 2 only		
Other i	information:	At least one of the debtors and another	entire property?	portion you own?
		Chack if this is as	\$	\$
		☐ Check if this is community property (see instructions)		T
L			*	•
-				•
145 11			. Г	
The doll:	ar value of the portion you ow	n for all of your entries from Part 2, including any entries f	or pages \$	•
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have att				

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Debtor 1

Part 3: Describe Your Personal and Household Items

D	o you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	or exemptions.
l L	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ N ₀	
	Was Dansilla	\$ 800,00
	turniture Living Room Set	\$ 000 ·
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	No Contraction of the Contractio	,
-	☐ Yes. Describe	\$
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	Yes. Describe	\$
9,	Equipment for sports and hobbies	_i
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, nool tables, golf clubs, skis; cances	
	and kayaks; carpentry tools; musical instruments	
	☑ No □ Yes Describe	7 .
	Yes. Describe	\$
10.	Firearms	1
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	No The state of th	
	Yes, Describe	\$
11.0	Clothes]
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
	Yes. Describe	1.1000
	Clothes] \$_1,000
12	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	gold, silver	
(Yes. Describe	\$
13. N	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
[
	Yes. Describe	¢
		\$
14. A	any other-personal and household items you did not already list, including any health aids you did not list	
8	No No	•
(Yes. Give specific information.	\$
12 4		
ە. F	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached or Part 3. Write that number here	\$
	Control to the first thank the second of the	

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Debtor 1

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Describe Your Financial Assets

Do you own or have any	legal or equitable interest in	any of the following?	-		Current value of the portion you own? Do not deduct secured claims
	•				or exemptions.
16 Cash Examples: Money you h	nave in your wallet, in your hon	ne, in a safe deposit box,	, and on hand when y	ou file your petition	: .
☐ No ☐ Yes				cash: 1800	\$
	·				
17. Deposits of money Examples: Checking, so	avings, or other financial accountial institutions. If you have m	unts; certificates of depos	sit; shares in credit un	ions, brokerage houses,	
No and other sil	miar institutions, it you have it	lumpie accounts with the	Same institution, isc	eacii.	•
☐ Yes		Institution name:			
	17.1. Checking account:				\$
	17.2. Checking account:				\$
•	17.3. Savings account:				\$
	17.4. Savings account:				\$
	17.5. Certificates of deposit:				\$
•	17.6. Other financial account:				\$
·	17.7. Other financial account:				\$
	17.8. Other financial account:				\$
	17.9. Other financial account:				\$
•			·		
18 Bonds, mutual funds, of Examples: Bond funds, i	or publicly traded stocks nvestment accounts with broke	erage firms, money mark	et accounts		
Yes	Institution or issuer name:		•		* -
					\$
		•			\$
					\$
		·			
19. Non-publicly traded st an LLC, partnership, a	ock and interests in incorpor nd joint venture	rated and unincorporat	ed businesses, incl	uding an interest in	
No	Name of entity:		•	% of ownership:	
Yes. Give specific information about				%	\$
them				0% %	\$
				%	\$
				-	

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ARICIA Bonner

Debtor 1

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e number (if known) 18-1337}

20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders, Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No. Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No. Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account; Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ Yes..... Institution name or individual; Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description:

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24. Interests in an education IRA			
		ent in a qualified ABLE program, or under a qualified state tuition program.	
26 U.S.C. §§ 530(b)(1), 529A(l	o), and 529(b)	(1).	•
₩ No	•		
Q Yes	Institution na	me and description. Separately file the records of any interests.11 U.S.C. § 521(o):
			•
•			\$
			\$
	····		\$
•			e e
25. Trusts, equitable or future interest exercisable for your benefit	erests in pro	perty (other than anything listed in line 1), and rights or powers	
No.	•		
☐ Yes. Give specific			1
information about them	٠.		\$
·			
		crets, and other intellectual property	
	nes, websites	, proceeds from royalties and licensing agreements	
No No			
Yes. Give specific			
information about them			\$
			····
27. Licenses, franchises, and oth			
	clusive license	es, cooperative association holdings, tiquor licenses, professional licenses	
<u> </u>			7
Yes, Give specific			
information about them			\$
			. National empleadant per la c
Money or property owed to you?	*		Current value of the
			portion you own? Do not deduct secured
			claims or exemptions.
28. Tax refunds owed to you		•	
No			
☐ Yes. Give specific information	on .		
about them, including t	whether	Federal:)
you already filed the re		State:	<u> </u>
and the tax years		Local:	<u> </u>
	L	The second secon	
		·	
29 Family support			•
	n alimony, sp	ousal support, child support, maintenance, divorce settlement, property settlemen	st
Examples: Past due or lump su	m alimony, sp	ousal support, child support, maintenance, divorce settlement, property settlemer	st
Examples: Past due or lump su	· ·	ousal support, child support, maintenance, divorce settlement, property settlemer	
Examples: Past due or lump su	· ·	ousal support, child support, maintenance, divorce settlement, property settlemen	nt \$
Examples: Past due or lump su	· ·		\$
Examples: Past due or lump su	· ·	Alimony: Maintenance:	\$ \$
Examples: Past due or lump su	· ·	Alimony: Maintenance: Support:	\$ \$ \$
Examples: Past due or lump su	· ·	Alimony: Maintenance: Support: Divorce settlement:	\$ \$
Examples: Past due or lump su	· ·	Alimony: Maintenance: Support:	\$ \$ \$
Examples: Past due or lump sur Yes. Give specific information On the content of	s you	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ \$ \$
Examples: Past due or lump sur Yes. Give specific information Other amounts someone owe Examples: Unpaid wages, disab	s you bility insurance	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ \$ \$
Examples: Past due or lump sur O Yes. Give specific information 30. Other amounts someone owe Examples: Unpaid wages, disable Social Security benefits	s you bility insurance	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ \$ \$
Examples: Past due or lump sur O Yes. Give specific information 30. Other amounts someone owe Examples: Unpaid wages, disate Social Security benefits and soc	s you bility insurance fits; unpaid lo	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ \$ \$
Yes. Give specific information Other amounts someone owe Examples: Unpaid wages, disable Social Security bene-	s you bility insurance fits; unpaid lo	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ \$ \$

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31. Interests in insurance policies Examples: Health, disability, or life insurance in the	ce; health savings account (F	HSA); credit, homeowner's, or renter's insurance	
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary;	Surrender or refund value; .
			\$
			\$
			•
32. Any interest in property that is due you if you are the beneficiary of a living trust, e property because someone has died. ☐ No ☐ Yes. Give specific information		d urance policy, or are currently entitled to receive	
		e de la companya de	\$
33. Claims against third parties, whether or Examples: Accidents, employment disputes No Yes. Describe each claim	not you have filed a lawsuit s, insurance claims, or rights t	t or made a demand for payment to sue	
· .!			\$
34 Other contingent and unliquidated claim to set off claims	s of every nature, including	counterclaims of the debtor and rights	
Yes. Describe each claim			
			\$
		•	
35. Any financial assets you did not already	list		
ŪN₀ ⊢			
☐ Yes. Give specific information			
36. Add the dollar value of all of your entries for Part 4. Write that number here	from Part 4, including any	entries for pages you have attached	s
	·		***************************************
والمراوية والأستين والمنافرة والمراوية والمتعادية والمتعادية والمتعادية والمتعادية والمتعادية والمتعادية والمت	en e	<u> با معالی میں میں میں استعمال کی ایک انتہاں کی ایک کا بات کا بات میں انتہاں کی میں انتہاں کی میں انتہاں کی می</u> انتہاں میں میں میں انتہاں کی انتہاں کی میں انتہاں کی م	er en
Part 5: Describe Any Business-R	elated Property You (Own or Have an Interest In. List any	real estate in Part 1.
37. Do you own or have any legal or equitable	e interest in any business-re	elated property?	
No. Go to Part 6.			
Yes. Go to line 38.			· · · · · · · · · · · · · · · · · · ·
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions you	already earned		
₩ No			The state of the s
Yes. Describe			
	·		\$
 Office equipment, furnishings, and supplies Examples: Business-related computers, software, r 		chines, rugs, telephones, desks, chairs, electronic device	s
Yes. Describe			
	**************************************		\$
			<u> </u>

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40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No. Yes. Describe... 41. inveptory **U** No Yes. Describe... 42.Interests in partnerships or joint ventures ☐ Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ No Yes. Describe...... 44. Any business-related property you did not already list ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5, Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes, Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish

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☐ Yes

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Debtor 1 Case numb	per (if known) 18 100 18
rist value wittole value Last Pame	
48. Crops—either growing or harvested	
□ No	and the state of t
Yes. Give specific	
information	\$
49 Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
Yes	
	\$
50. Farm and fishing supplies, chemicals, and feed	
□ No	
☐ Yes	
	\$
51. Any farm- and commercial fishing-related property you did not already list	
□ No	
Yes. Give specific information	· p
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have for Part 6. Write that number here	attached \$
Sometiment of the second secon	■
Part 7: Describe All Property You Own or Have an Interest in That You Did	l Not List Above
53. Do you have other property of any kind you did not already list?	
Examples: Season tickets, country club membership	
	•
Yes. Give specific information	\$
	\$
54. Add the dollar value of all of your entries from Part 7. Write that number here	→ \$
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	→ \$ <u> </u>
56. Part 2: Total vehicles, line 5	Em team activity applications of the second contraction of the second
. 010	
57. Part 3: Total personal and household items, line 15	
58. Part 4: Total financial assets, line 36	
59. Part 5: Total business-related property, line 45	·
To the second se	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54 + \$	3
62. Total personal property. Add lines 56 through 61	sonal property total → + s 20 818
copy per	on a property total
63. Total of all property on Schedule A/B. Add line 55 + line 62.	\$
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Schedule A/B: Property

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Official Form 106A/B

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Fill in this in	formation to ide				
Ďebtor 1 '	First Name	Middle Name	Last Name		
Debtor 2	, at rollio	- Addition Fairno	·	<u>.</u>	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court fo	r the: Northern District of II	linois		
Case number (If known)			·		

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	art 1: Identify the Property You Cla	im as Exempt		
1.	Which set of exemptions are you claimin You are claiming state and federal nont You are claiming federal exemptions. 1	pankruptcy exemptions. 11		
2.	For any property you list on Schedule A/	B that you claim as exen	npt, fill in the information below.	
	Brief description of the property and line of Schedule A/B that lists this property	on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description: Line from Schedule A/B:	ss	\$ \$ 100% of fair market value, up to any applicable statutory limit	
	Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
	Brief description: Line from Schedule A/B:	_ \$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covered No Yes	/ 3 years after that for case	es filed on or after the date of adjustment.)	

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N				
Debtor 1			Case number (if known)	
	First Name Middle Name	Last Name		

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	. \$	□ \$	
Line fromSchedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description;	\$		
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	/
Brief description:	\$	U \$	naur.
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	U \$	emini de la cerca de la compania de La compania de la co
Line from Schedule A/B:		☐ 198% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B;		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	s	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:	·	100% of fair market value, up to any applicable statutory limit	· .
Brief description:	\$	□ \$	······································
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	 s	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brist description:		 \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your ca	S e:		
Debtor 1		•	
First Name Middle Debtor 2	Name Last Name	•	
(Spouse, if filing) First Name Middle	Name Last Name		
United States Bankruptcy Court for the: Northern	District of Illinois		
Case number (if known)	-	Charle	real to the
(II KIIOWI)			if this is an led filing
Official Form 106D			and the second
Schedule D: Creditor	s Who Have Claims Secur	ed by Property	12/15
Be as complete and accurate as possible.	If two married people are filing together, both are e	gually responsible for sumplying correc	· 6
information. If more space is needed, cop additional pages, write your name and cas	v the Additional Page, fill it out, number the entries.	and attach it to this form. On the top of	any
1. Do any creditors have claims secured b			
No. Check this box and submit this for	m to the court with your other schedules. You have noth	ing else to report on this form.	
Yes. Fill in all of the information below.			
Part 1: List All Secured Claims		/	
		Column A Column B	Column C
for each claim. If more than one creditor ha	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabelical order according to the creditor's name.	Amount of claim Value of collateral Do not deduct the that supports this value of collateral claim	Unsecured portion
2.1	Describe the property that secures the claim:	- 1 (1875年 1967年 - 1975年) - 1977年(1967年) 日報会議会会会 - 第 - 1987年 - 198	্য টাড্রিটিন সভ্যান্ত । •
Creditor's Name		**************************************	P
Number Street	/		
•	As of the date you file, the claim is: Check all that apply.	_J	
	☐ Contingent		
City State ZIP Code	Unliquidated Disputed		
Who owes the debt? Check one.			
Debtor 1 only	Nature of liep. Check all that apply.		
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)		
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)		
Check if this claim relates to a	Other (including a right to offset)	<u>.</u>	
Community debt Date debt was incurred	Last 4 digits of account number	•	
2.2		TOTAL CONTRACTOR AND	Application process to the second section of the forest second section of the forest section of the forest second section of the forest section of the for
Creditor's Name	Describe the property that secures the claim:	\$\$, r	
	·		
Number Street -	* (A) . 1.4 (2) . 41 (1) . (A) . (A) . (A)		
	As of the date you file, the claim is: Check all that apply. Contingent		
· · ·//	Unliquidated		
City State ZIP Code	☐ Disputed	***	
Who owes the debt? Check one.	Nature of lien. Check all that apply.		
Debtor 1 only	An agreement you made (such as mortgage or secured)		
Debtor 2 only	car loan)		
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit		
Parada,	Other (including a right to offset)		
☐ Check if this claim relates to a community debt			
Date debt was incurred	Last 4 digits of account number		
e night per en an an an an an ann an an an an an an a	Olympia A on this name (Blata the Lange)	A PROPERTY OF THE PROPERTY OF	

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Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A = Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	* *	\$	\$
Creditor's Name		1		
Number Street	-			
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		12.4	
Who owes the debt? Check one.	Nature of lien. Check all that apply.		•	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number	•		
Creditor's Name	Describe the property that secures the claim:	\$	\$3	
Number Street				
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated Disputed	•		
Who owes the debt? Check one.	Nature of lien, Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt	Otter (morating a right to bissel)			
Date debt was incurred	Last 4 digits of account number	,		
	Describe the property that secures the claim:	\$	\$ \$	
Creditor's Name		•		
Number Street			,	
	As of the date you file, the claim is: Check all that apply.	-		
City State ZIP Code	Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.	•		
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)	4 · · · · · · · · · · · · · · · · · · ·		
☐ Check if this claim relates to a community debt			·	
Date debt was incurred	Last 4 digits of account number			
	in Column A on this page. Write that number here:			

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Debtor 1	First Name Middle Name	Last Name		Case number (if known)
Part 2:	List Others to Be No	otified for a Debt	That You Alread	ly Listed
Use this pag agency is try you have mo	ge only if you have others	to be notified abou or a debt you owe to any of the debts tha	t your bankruptcy fo o someone else, list t t you listed in Part 1,	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
	or any abbito m, are if an	THOU THE COLL OF SUBIR	n uno page.	
 Name		-		On which line in Part 1 did you enter the creditor?
				Last 4 digits of account number
Number	Street			······································
	· ·			<u> </u>
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
			,	_
City		State	ZIP Code	-
And the second second	<u>anna en Sucreso, en apara chi, mangalendarani, combinari parane, en apara periodi delegarani manusi baba</u>	mpakay yang kang mengenggang perdangan di dipanggangkan dan kang kang kang kang kang kang kang ka	с іні ў міра (1894 — 1885 — 1863 — 1864 — 1864 — 1864 — 1864 — 1864 — 1864 — 1864 — 1864 — 1864 — 1864 — 1864 — 1	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number

Number	Street			
				<u>.</u>
City		State	ZIP Code	_
Terror Merchanter	metja tjutjutjutjuvingovingovingovigovijakologiskovidoda anakiralada anakanamanjumoj pyljovoja o guv	entre de la companya	erk Carlot Survey Mandal Madal supply was remaining to the Fifth Andrews 277 but Survey's Cales Cales Carlot	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			···
				_
City		State	7/0.0-1-	-
City		Otale	ZIP Code	
J				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
N	-			_
-				-
City		State	ZIP Code	-
	:		The state of the s	On which line in Part 1 did you enter the creditor?
Name			A-18	Last 4 digits of account number
Number	Street			
[TARTING)	Subst .	**	٠	
				-
City		State	· ZIP Code	

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	Debtor 1 First Name Debtor 2 Spouse, if filing) First Name Middle Name	Last Name Last Name of Illinois		Check if this is an amended filing
-	official Form 106E/F	ho Have Unsecured Clain	me	40/45
Be Lis A/i cre ne an	e as complete and accurate as possible. Use Part st the other party to any executory contracts or under the party (Official Form 106A/B) and on Scheduleditors with partially secured claims that are listed eded, copy the Part you need, fill it out, number the yadditional pages, write your name and case number the part you name and case number the part your name and case number the party your name and your n	1 for creditors with PRIORITY claims and Part 2 for nexpired leases that could result in a claim. Also little G: Executory Contracts and Unexpired Leases (d in Schedule D: Creditors Who Have Claims Securities in the boxes on the left. Attach the Contimber (if known).	r creditors with NONPi ist executory contracts Official Form 106G). D red by Property. If mo	s on <i>Schedule</i> To not include any re space is
L	art 1: List All of Your PRIORITY Unsecure	o Gams		
	each claim listed, identify what type of claim it is. If a	against you? editor has more than one priority unsecured claim, list the claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's n	nat claim here and show	both priority and
 2.1	unsecured claims, fill out the Continuation Page of For an explanation of each type of claim, see the in	Part 1. If more than one creditor holds a particular claim	Total claim Prio	in Part 3.
	Priority Creditor's Name 33RD Suits 1330 W 33RD Suits Number Street KS 67205 City State ZIP Code	When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply Contingent	,	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Unliquidated ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were		
2.2	Is the claim subject to offset? No Yes	intoxicated Other, Specify		
2	American First Firance Priority Creditor's Name 3515 N Picoce PD # 200 Number Street	Last 4 digits of account number	\$1,532 \$_	\$·
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	-	
	Q No □ Yes			

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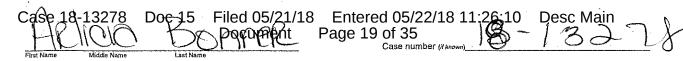
Pa	Your PRIORITY Unsecured Claims	– Continuation Page		
Aft	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority amount	Nonpriority amount
	Annual Landson		10077	CTM fourt (This I gains at
	Friendly Finance	Last 4 digits of account number	s/d,7//s	\$
	Priority Creditor's Name 1340 STUTHUBIND #20	When was the debt incurred?		
	Balitmore, MD 21207	As of the date you file, the claim is: Check all that apply.	a.	
	,	Contingent Contingent		
	City State ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		•
	Debtor 1 only	Type of PRIORITY unsecured claim:		
	Debtor 2 only	•		
	Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government	· ·	
	At least one of the debtors and another	Claims for death or personal injury white you were		
	☐ Check if this claim is for a community debt	intoxicated General Specify		
	Is the claim subject to offset?	Green Specify		
	□ √0°			
	Yes			
	MADRIAN ROOL		12/120	•
	Priority Creditor's Name	Last 4 digits of account number	\$ 12 JULY CO	Φ
	4701 W. fullerton	When was the debt incurred?	e e e e e e e e e e e e e e e e e e e	
	Chirona JII Looks	As of the date you file, the claim is: Check all that apply.		
		Contingent		
	City State ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	Debtor 1 only	Type of PRIORITY unsecured claim:		
	Debtor 2 only	Domestic support obligations		
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government		
	At least one of the debtors and another	Claims for death or personal injury while you were		•
	☐ Check if this claim is for a community debt	intoxicated		
		Other. Specify		
	Is the claim subject to offset?	•		
	Yes ·			
	Chrack Parking	The control of the co	19000 :	\$
	Priority Creditor's Name	Last 4 digits of account number	7	
	Number Street	When was the debt incurred?		
	(h/Cago, I/ 60602	As of the date you file, the claim is: Check all that apply.		
		☐ Contingent		
	City State ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	Disputed		r
	·	Type of PRIORITY unsecured claim:		
	Debtor 1 only Debtor 2 only			
	Debtor 1 and Debtor 2 only	Domestic support obligations	•	
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were		
	Check if this claim is for a community debt	intoxicated	PREMIUM COMMUNICATION OF THE PROPERTY OF THE P	an paragraphy of 2000 i margin, appears annual an fairm ann and fairm an analysis and a fair state of the sta
	is the claim subject to offset?	Officer. Specify		
	1 No	•	-	
	Yes			

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Part 2:

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you Do. You have nothing to report in this part. Submit this form to the Ves		
4.	List all of your nonpriority unsecured claims in the alphabetical of nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, licking fill out the Continuation Page of Part 2.	 For each claim listed, identify what type of claim it is. Do no 	t list claims already
			Total claim
.1	3 SPRINT LEGAL DEDARTMENT	Last 4 digits of account number	10 407)
	P.O. Box 4600	When was the debt incurred?	\$ <u>0,000</u>
	Number Street VA 20/95 City VA 20/95	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? No Ves	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
2	7/8		1910
	Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$_1,_1
	1.S. WACKER DR	witch was the dept linearied;	
	Chicago II 60604	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Z Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only Debtor 2 only	☐ Disputed	i, dament la
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	The state of the s
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	100
	U No □ Yes	Other Specify	A My page - v gate
	Comcast	Last 4 digits of account number	000
	Nonpriority Creditor's Name	When was the debt incurred?	\$ 00 C
	Chica Of Philodelphia DA		
	2.0000	As of the date you file, the claim is: Check all that apply.	
	To Treate a color	Contingent Unliquidated Disputed	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Charle Making at the trade of the	Student loans	and the second s
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<u>□</u> 1700	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Q Other. Specify	THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS O
			1



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sal.	es es	u	and	Ы

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
- People GAS	Last 4 digits of account number	2250
Newporter Creditors Name RANdolph	When was the debt incurred?	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	As of the date you file, the claim is: Check all that apply.	-
City State ZIP Code	Contingent Unliquidated	Promote a picture
Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	A Other. Specify	
☐ Yes		
D hal all as		2.60
Nonpriority Creditor's Name	Last 4 digits of account number	\$27,00
300 Centre Point Drive	When was the debt incurred?	
Virginia Beach, VA 23462	As of the date you file, the claim is: Check all that apply.	
City Staffe ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☐ Yes		
1/0-1/40000 155000-1000	Last 4 digits of account number	1001
Nonpriority Creditor's Name		
1151 E. WARRENUITE	When was the debt incurred?	The state of the s
NAperville III 60653	As of the date you file, the claim is: Check all that apply.	4; may 1 12 makes
	☐ Contingent ☐ Unliquidated	-
Who incurred the debt? Check one. Debtor 1 only	Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	en company
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce that	Chapter de la constitución de la
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	☐ Other. Specify	e primator de Planando
☐ Yes	·	Aprillation Application to
		_

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First kame Middle Name Last Name

Part 3: Li:

List Others to Be Notified About a Debt That You Already Listed

example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For u for a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ns to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Diversified Adjustment	On which entry in Part 1 or Part 2 did you list the original creditor?
PO BOX 32414	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Fridley MN 55432	
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
-	Claims
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZiP Code	Last 4 digits of account number
AMIZZO RELEVIZARIA (CONTROL CONTROL CO	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
Cit	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
•	Line of (Check and) The Boot of Conditions with the state of
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
	Last A digits of account number
City State ZIP Code	Last 4 digits of account number

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ш	C.	L#	3	ü	ы
			33		

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total cla	aim
Total claims	6a. Domestic support obligations	6a. \$	<u>}</u>
from Part 1	6b. Taxes and certain other debts you owe the government	6b. \$	
. *	6c. Claims for death or personal injury while you were intoxicated	6c. \$	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$	
	6e. Total. Add lines 6a through 6d.	6e. \$	8
	·	Total cla	olm
Total claims	6f. Student loans	6f. \$	
rom Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$	2
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _{\$}	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + _{\$}	
	6j. Total. Add lines 6f through 6i.	6j. \$	0

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Fill in this information to identify your case:	E EXAMPLE	
Debtor First Name Middle Name Last Name		
Debtor 2 (Spouse If filling) First Name Middle Name Last Name		
United States Bankruptcy Court for the: Northern District of Illinois		
Case number 1533		Check if this is an
(If known)		amended filing
0.00		•
Official Form 106G	d Unavnivad Lagges	40/45
Schedule G: Executory Contracts an		12/15
Be as complete and accurate as possible. If two married people are filing information. If more space is needed, copy the additional page, fill it out, additional pages, write your name and case number (if known).	number the entries, and attach it to this page. On th	e top of any
Do you have any executory contracts or unexpired leases? No Check this box and file this form with the court with your other scheduler. Fill in all of the information below even if the contracts or leases.	nedules. You have nothing else to report on this form. are listed on <i>Schedule A/B: Property</i> (Official Form 106/	4/B).
List separately each person or company with whom you have the co example, rent, vehicle lease, cell phone). See the instructions for this f unexpired leases.	ntract or lease. Then state what each contract or lea orm in the instruction booklet for more examples of exec	se is for (for outory contracts and
Person or company with whom you have the contract or lease	State what the contract or lease is for	
21 Fyter france		1
PO. BOX 1106008		dinoN
Number Street Triling TX 750160		
City State ZIP Code		Bearing Monthly and the second of the second
2.2		
Name		
Number Street	· 	
City State ZIP Code 2.3		
Name		
Number Street	·	
City State ZIP Code	- China Shari, 1845 and and 1944 and and an analysis of the China Sharing and Artificial Sh	NACT (A. LACTAL ACCASA PROPER STAFFAR
Name		
Number Street		•
City State ZIP Code		CONTROL CONTRO
2.5	·	
Name		
Number Street		
City State 7IP Code	·	

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Debto	ır 1			· · · · · · · · · · · · · · · · · · ·	Case number (if known)
		First Name	Middle Name	Las! Name	
		Additional	Page if You H	ave More Contracts or Leases	
	- Annual Control				
- 1	Persor	or compan	y with whom you	have the contract or lease	What the contract or lease is for
22				·	
	Name				<u>. </u>
	\$1b.s.	r Street	·		
	Number	r Street	4		
	City		State	ZIP Code	·
2	de manteuro	en era en endre 64 departe en mesta en nomer	riturien est arterar printera et mais de la sum Cirio et	e durante manta de como ester un trappor de l'indica sotto la producció de la Milla de porta de la Companya de	
	Name	Washerton			
,	Number	Street			
	City		State	ZIP Code	·
2.	ri (usaninan			ar na na maran na ana ana ana ana ana ana ana ana	
	Name	-			
	Number	Street		•	
	City		State	ZIP Code	
2	entrages over				
2	Nt				
	Name		i e		
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1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) Yes Yes	Fill in this information to identify your case:	
Debber 2 (Sposs, Wilder Firstame Most Name Lustines Lustines	Debtor 1 HPICIA PRIMER	
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Schedule E/F, line		Schedule D, line
City State ZIP Code	Name	•
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Schedule E/F, line	3.2	
Number Street ☐ Schedule G, line City State ZIP Code 3.3 ☐ Schedule D, line ☐ Schedule E/F, line	Name	•
City State ZIP Code 3.3 Name Schedule D, line Schedule E/F, line	Number Street	
Name □ Schedule D, line □ Schedule E/F, line	Haliber Olice	G Schedule G, line
Name Schedule D, line Schedule E/F, line		
Schedule E/F, line		Schedule D, line
Number Street Schedule G, line	Name	1
	Number Street	

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Debto	re 1		Case number (#known)
Denic	First Name Middle Name Last Name		
	A A Maria Carlohtors		
	Additional Page to List More Codebtors		
	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
3			Schedule D, line
	Name		Schedule E/F, line
	Number Street		Schedule G, line
	City State	ZIP Code	
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and the second	Number Street		Schedule G, line
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3	City State	ZIP Code	
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			n approximate
	City State	ZIP Code	

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Fill in this information to identify	yyour case:					
Debtor 1 HUCO	Bonne	R.				
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Last Name	manus de la companya			
United States Bankruptcy Court for the:					•	
Case number (If known)	3278			Check if th		
	. 0			An ame		
055 15 400					lement showing post as of the following d	
Official Form 106I	<u> </u>			MM / DE	D/ YYYY	
Schedule I: You	ur Income				•	12/15
Be as complete and accurate as p supplying correct information. If y If you are separated and your spot separate sheet to this form. On the Part 1: Describe Employm	ou are married and not fili use is not filing with you, (∍ top of any additional pag	ng jointly, and y do not include i	our spouse is li nformation abou	iving with you It your spou	ou, include information se. If more space is no	n about your spouse eeded, attach a
Fill in your employment information.		Debtor 1		· ·	Debtor 2 or non-fil	ing spouse
If you have more than one job,	•	SPEA MERTINANS LIKEWAY, MININANS STANDARD SPECIES SPECIES	A STATE OF THE PARTY OF THE PAR	kirid di bili makerian di kabupaten kura ada zabas	The state of the s	i den de servicio de l'Article d
attach a separate page with information about additional employers.	Employment status	Employed Mot emplo			Employed Not employed	
Include part-time, seasonal, or self-employed work.		·	•	•		•
Occupation may include student or homemaker, if it applies.	Occupation					MAAMIMINA AS AND PROVINCE AND
	Employer's name	***************************************				
•	Employer's address					
	Employer's address	Number Street			Number Street	
•						
'						
		City	State ZIP Co	de	City	State ZIP Code
	How long employed there	· ·	2,, 00		O.C.	State Zii Gode
	now long employed then	ər ————————————————————————————————————	-			
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of	the date you file this form.	. If you have noth	ing to report for a	any line, write	\$0 in the space. Include	de your non-filing
spouse unless you are separated.						
If you or your non-filing spouse ha below. If you need more space, at	ve more than one employer tach a separate sheet to this	, combine the info s form.	ormation for all ei	mployers for	that person on the lines	î
			For Do	ebtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly,	I ry, and commissions (befo calculate what the monthly v	ore all payroll vage would be.	2.	(iii) and the second s	Portraction Communication of the Communication of t	
3. Estimate and list monthly over	time pay.		3. +s		+ \$	
4. Calculate gross income. Add lin	e 2 + line 3.		4. \$		\$	
		······································				

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Debtor 1

He	lico	BO	Document
irst Name	Middle Name	Last Marse	

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Case number (if known) | 8 - (3) 7 8

		For Debtor 1	For Debtor 2 or non-filing spouse	-
Copy line 4 here	. 🗲 4.	\$	\$	•
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a		¢	
5b. Mandatory contributions for retirement plans	5b	Y	φ	
5c. Voluntary contributions for retirement plans	. 5c	· · · · · · · · · · · · · · · · · · ·	\$	
5d. Required repayments of retirement fund loans	5d			
5e. Insurance	5e			
5f. Domestic support obligations	5f.	\$		
5g. Union dues	5g.	\$	<u> </u>	
5h. Other deductions. Specify:	5h.		+ e	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5r		\$	φ	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.		Ψ		
Subtract line 6 from line 4.	7.	· \$	\$	
List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	0-	\$	\$	
8b. Interest and dividends	8a. 8b.	¢.		
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent	•		•
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$. \$	
8d. Unemployment compensation	8d.	:240D) e	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ice 8f.			
8g. Pension or retirement income		*		
	8g.	\$	\$	
8h. Other monthly income. Specify:	8h	+\$	+\$	
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
Calculate monthly income. Add fine 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	+ \$=	\$
State all other regular contributions to the expenses that you list in Sched include contributions from an unmarried partner, members of your household, you friends or relatives.	ule J. our de	pendents, your roo	ommates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are n	ot ava	ilable to nav exne	nses listed in Schodula I	
Specify:			11. +	\$
Add the amount in the last column of line 10 to the amount in line 11. The now that amount on the Summary of Your Assets and Liabilities and Certain States.	esult id	the combined m	orthly in an are	\$
Do you expect an increase or decrease within the year after you file this fo	rm?			Combined monthly income
Yes. Explain:				

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Fill in this information to identi	y your case:	Page 28 of 35		
Debtor 1 First Name	+ Bonne Last Name	Check if this	is:	
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An amen	ded filing	
United States Bankruptcy Court for the	: District of			tpetition chapter 13
Case number (If known)	3278	MM / DD /	s as of the followin	ig date:
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
(if known). Answer every question		m. On the top of any additional pag UNI	ges Write your nam	ne and case number
Part 1: Describe Your Ho	usehold	.,		
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a service of the control	separate household? e Official Form 106J-2, Expenses for	JEFFR	MAY 2120 EY P. ALLSTEA INTAKE	18
 Do you have dependents? Do not list Debtor 1 and Debtor 2. 	No Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	each dependent	Son Saughter Grandson Grandson Grandson	25 21 3 2	No Ves No Ves No Ves No Ves No Ves
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes		W V	
art 2: Estimate Your Ongois	ng Monthly Expenses	en e	territorian territoriane, de la companya de la comp	and the second s
Estimate your expenses as of your expenses as of a date after the bank applicable date. Include expenses paid for with non-	bankruptcy filing date unless you a cruptcy is filed. If this is a supplement cash government assistance if you it on Schedule I: Your Income (Office	ental Schedule J, check the box at the know the value of	in a Chapter 13 ca the top of the form Your expens	and fill in the
	penses for your residence. Include		\$	
If not included in line 4:				
Real estate taxes Property, homeowner's, or rer	ntora innurana	4	a. \$	
4b. Property, homeowner's, or rer4c. Home maintenance, repair, ar		4	-	
4d. Homeowner's association or c		4		
		40	ı. ••	

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Ċ			Tour expenses
	Additional mortgage payments for your residence, such as home equity loans	5.	\$ 91500
6		J.	
·	6a. Electricity, heat, natural gas	6a.	. 5000
٠.	6b. Water, sewer, garbage collection	6b.	5000
•	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	1500
٠.	6d. Other. Specify:	6d,	\$ <u>1~7~</u> \$
. 7		7.	\$
8.	Childcare and children's education costs	8,	\$
9	Clothing, laundry, and dry cleaning	9.	\$ 100.00
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	* 10000
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14,	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	, 10500
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$ 125 00
	15d. Other insurance. Specify:	15d,	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$535°C
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Filed 05/21/18 Case 18-13278 Doc 15 Entered 05/22/18 11:26:10 Page 30 of 35 Document Debtor 1 Other, Specify: Calculate your monthly expenses. 22. 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 23b. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. Yes. Explain here:

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Use this form for Debtor 2's separate Debtor 2 have one or more dependently with respect to expenses for its contraction.	Middle Name Last Name Northern District of Illinois Expenses for Sepa ate household expenses ONLY IF Delents in common, list the dependent Debtor 2 that are not reported on Sci	expenses MM / DD / rate Household (abtor 1 and Debtor 2 maintain seps on both Schedule J and this for the dule J. Be as complete and accomplete accomplete and accomplete accomplete accomplete accomplete and accomplete a	ment showing posts as of the following YYYY Of Debtor Darate households. rm. Answer the quiccurate as possible.	2 12/15 If Debtor 1 and estions on this form If more space is
question.	is form. On the top of any additional	pages, write your name and cas	e number (it known). Answer every
Part 1: Describe Your Hou	sehold			
1. Do you and Debtor 1 maintain set No. Do not complete this for Yes	•			
2. Do you have dependents?	□ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J. Do not state the dependents names.	Yes. Fill out this information for each dependent	Debtor 2:	age	with you? No Yes No Yes No
			-	No Yes No Yes No Yes No Yes
3. Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	☐ No ☐ Yes			
Part 2: Estimate Your Ongoi	ng Monthly Expenses			
Estimate your expenses as of your expenses as of a date after the ban include expenses paid for with non such assistance and have included	bankruptcy filing date unless you a	know the value of cial Form 106l.)	ent in a Chapter 13 o Your expe	Sinta wayan sa
any rent for the ground or lot.			4. \$	
If not included in line 4:			_	
4a. Real estate taxes	antoria inguranca		4a. \$	
4b. Property, homeowner's, or re		·	4b. \$ 4c. \$	
4d. Homeowner's association or			4d. \$	

Case 18-13278 Doc 15

Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations 14. \$ Savanare. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify. 15d. S 15d. S 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify. 16. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify. 17d. Other specify. 17d. S 17d. Other specify. 17d. S 17d.	,		:	Your expenses
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8a. Electricity, hoat, natural gas 8b. Waler, sewer, garbage collection 9c. Telephone, cell phone, internet, satellite, and cable services 6c. 6c. 5 6c. 6c. 5 6c.	5.	Additional mortgage payments for your residence, such as home equity loans	5.	
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			20d.	\$
		20e. Homeowner's association or condominium dues	20e.	\$

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21.	Other, Sp	ecify:		21.	+\$		
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	16	thly expenses. Add lines 5 through 21.					
	The result	is the monthly expenses of Debtor 2. Copy the result to line 22b of sees for Debtor 1 and Debtor 2.	Schedule J to calculate the	22.	\$		
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23.	Line not us	ed on this form.	•				
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24.		pect an increase or decrease in your expenses within the year a					
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Case 18-13278 Doc 15 Filed 05/21/18 Entered 05/22/18 11:26:10 Document Page 34 of 35 UNITED STATES BANKRUPTCY COURT Fill in this information to identify your case: NORTHERN DISTRICT OF ILLINOIS Debtor 1 MAY 21 2018 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name JEFFREY P. ALLSTEADT, CLERK United States Bankruptcy Court for the: ___ District of _ INTAKE 1 Case number (If known) Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No. ☐ Yes. Name of person . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2

MM / DD / YYYY

Case 18-13278 Doc 15 Filed 05/21/18 Entered 05/22/18 11:28:10 Description Document Page 35 of 35 UNITED STATES BANKRUPTCY COUR NORTHERN DISTRICT OF ILLINOIS

Fill in this in	formation to identify y	your case:	
Deblor 1	ARIO2	<u>i Bon</u>	mer
Debtor 2	, pat realitie	Middle Name	Last Name
(Spouse, if filing)	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	Northern District of II	linois
Case number (If known)	18-13	52 न	<u>}</u>

MAY 21 2018

JEFFREY P. ALLSTEADT, CLERK
INTAKE 1

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
nder penalty of perjury, I declare that I ha at they are true and correct.	ve read the summary and schedules filed with this declaration and
0 - 0	
Unlicia Donn	Le x